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HIPAA HIO-201

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QUESTION NO: 1

Use or disclosure of Protected Health Information (PHI) for Treatment, Payment, and Health care Operations (TPO) is:

- A. Limited to the minimum necessary to accomplish the intended purpose.
- B. Left to the professional judgment and discretion of the requestor.
- C. Controlled totally by the requestor's pre-existing authorization document.
- D. Governed by industry "best practices" regarding use.
- E. Left in force for eighteen (18) years.

ANSWER: A

QUESTION NO: 2

The purpose of this security rule standard is to implement technical policies and procedures for electronic information systems that maintain electronic PHI, and to allow access only to those persons or software programs that have been granted access rights:

- A. Person or Entity Authentication
- B. Audit Controls
- C. Facility Access Controls
- D. Transmission Security
- E. Access Controls

ANSWER: E

QUESTION NO: 3

ABC Hospital implements policies and procedures to ensure that all members of its workforce have appropriate access to electronic protected health information. These policies and procedures satisfy which HIPAA security standard?

- A. Security Management Process
- B. Facility Access Control
- C. Security Awareness and Training
- D. Workforce Security

E. B Security Management Process**ANSWER: D****QUESTION NO: 4**

Select the correct statement regarding the transaction rule.

- A.** The Transaction standards apply to electronic transactions.
- B.** ERISA plans are exempted from the standard.
- C.** Data stored by a covered entity must meet the transaction standards if the covered entity is directly submitting standard transactions.
- D.** A covered entity (e.g. provider, health plan) may submit non-standard transactions to a clearinghouse that converts them into standard transactions.
In this case the covered entity still needs to store its data in transaction standard formats.
- E.** State Medicaid programs need not meet the same requirements as private health plans.

ANSWER: A**QUESTION NO: 5**

When limiting protected health information (PHI) to the minimum necessary for a use or disclosure, a covered entity can use:

- A.** Their professional judgment and standards.
- B.** The policies set by the security rule for the protection of the information.
- C.** Specific guidelines set by WEDI.
- D.** Measures that are expedient and reduce costs.
- E.** The information for research and marketing purposes only.

ANSWER: A**QUESTION NO: 6**

The State of Nebraska's Medicaid Program has decided to implement an EDI solution to comply with the HIPAA transaction rule. Select the transaction or code set that would not apply to them.

- A.** 270

- B. 835
- C. 837 - Professional
- D. CPT-4
- E. U8-92

ANSWER: E

QUESTION NO: 7

This Security Standard addresses the proper functions to be performed on a specific workstation as well as the physical attributes of its surroundings:

- A. information Access Management
- B. Workstation Security
- C. Access Control
- D. Facility Access Controls
- E. Workstation Use

ANSWER: E

QUESTION NO: 8

A covered entity that fails to implement the HIPAA Privacy Rule would risk:

- A. \$5 .000 in fines.
- B. \$5000 in fines and six months in prison.
- C. An annual cap of \$50000 in fines.
- D. A fine of up to \$50000 if they wrongfully disclose PHI.
- E. Six months in prison.

ANSWER: D

QUESTION NO: 9

Which transaction covers information specific to accidents?

- A. Accident Report.
- B. First Report of Injury.
- C. Health Care Claim.
- D. Health Care Claim Payment/Advice.
- E. Premium Payment.

ANSWER: B

QUESTION NO: 10

The transaction number assigned to the Health Care Eligibility Request transaction is:

- A. 270
- B. 276
- C. 278
- D. 271
- E. 834

ANSWER: A